

REPORTS INVENTORY					CONTROL NO.	
<b>PREPARE IN DUPLICATE</b> 1. TITLE OF REPORT (If a fill-in report include Form No.) <div style="font-size: 1.2em; font-family: cursive;">930 F UV RETRO-ACTIVE CASE</div>					<div style="font-size: 1.5em; font-family: cursive;">SRB 930 F</div>	
3. FUNCTIONAL AREA <input checked="" type="checkbox"/> PERSONNEL <input type="checkbox"/> LOGISTICS <input type="checkbox"/> MEDICAL <input type="checkbox"/> TRAINING <input type="checkbox"/> SECURITY <input type="checkbox"/> FINANCE					2. TYPE OF REPORT <input type="checkbox"/> STATISTICAL <input type="checkbox"/> NARRATIVE <input checked="" type="checkbox"/> MACHINE-NAME LISTING	
					ADMIN. GENERAL OTHER (specify)	
4. NO. OF COPIES PREPARED <div style="font-size: 1.5em; font-family: cursive;">3</div>		5. FREQUENCY (weekly, monthly, quarterly, etc.) <div style="font-size: 1.5em; font-family: cursive;">P</div>		6. DISTRIBUTION (No. of components not number of copies) <div style="font-size: 1.5em; font-family: cursive;">2</div>		
7. FORMAT (memorandum, form, computer print-out, etc.) <div style="font-size: 1.5em; font-family: cursive;">C P-O</div>		8. ADP PROCESSING <input checked="" type="checkbox"/> YES    IF YES GIVE ADP PROCESSING NO. <div style="font-size: 1.5em; font-family: cursive;">H-07</div>		9. DIRECTIVE AUTHORITY REQUIRING REPORT		
10. PREPARING COMPONENT (include lowest level contributing information to report) <div style="font-size: 1.2em; font-family: cursive;">OCS/OPERATIONS</div>			11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)			
<b>12. COST FACTORS</b>						
<b>A. MANUAL PREPARATION AND REVIEW COSTS</b>						
GRADE	HOURLY RATE	X HOURS PER REPORT	= COST PER REPORT	X TIMES PREPARED	= COST PER YEAR	
GS-06-3	4.21	.43	1.81	26	47.06	
<b>B. COSTS OF COMPUTER PRODUCED REPORTS</b>						
			.18	26	4.68	
<b>TOTAL COSTS PER YEAR</b>					\$51.74	
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (In addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.						
<div style="border: 1px solid black; padding: 2px;">MORI/CDE</div>						
<b>14. FUTURE GOALS</b>						
15. PROPOSED BY COMPONENT FOR THIS REPORT <input type="checkbox"/> RETAIN AS IS <input type="checkbox"/> OTHER (explain) <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE					<b>ESTIMATED SAVINGS</b> <div style="display: flex; justify-content: space-between;"> <div>MAN-HOURS</div> <div>STAT DOLLARS</div> </div>	
16. DATE OF INVENTORY <div style="font-size: 1.2em; font-family: cursive;">2 NOV 1970</div>		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			18. EXTENSION	